

Department of Social and Health Services  
Olympia, Washington

**ELIGIBILITY A-Z MANUAL REVISION**

Revision #	<b>420</b>
Category / Section	<b>Benefit Errors A – Cash and Medical Assistance Overpayment Descriptions</b>
Issued	<b>June 1, 2005</b>
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**REMOVE**

Benefit Errors A. – WAC 388-410-0001

**INSERT**

Benefit Errors A. – WAC 388-410-0001

**Summary**

**WAC 388-410-0001**

Updated rule to reference reporting requirements under WAC 388-418-0005 and reporting timeframes under WAC 388-418-0007.

With some exceptions, clients have until the 10<sup>th</sup> day of the month after a change happens to tell the department about changes they must report.